

Table 16: **Rev**

HXB2 Location	Author Location	Sequence	Immunogen	Species(HLA)	References
Rev(9–23)	Rev(9–23 HXB2) • Induces both Th and CTL activities, no HLA restriction analysis performed	DEELIRTVRLIKLLY	HIV-1 infection	human()	[Blazevic (1995)]
Rev(12–31)	Rev(11–30 SF2) • Of 25 patients, most had CTL specific for more than one HIV-1 protein • Only one subject (HLA-A2, A24, B13, B35) had CTL that could recognize vaccinia-expressed LAI Rev	LLKAVRLIKFLYQSNP-PPNF	HIV-1 infection	human()	[Lieberman (1997a)]
Rev(14–23)	Rev(14–23 clade B) • C. Brander notes this is a B*5701 and a B*5801 epitope	KAVRLIKFLY		human(B*5701, B*5801)	[Addo (2001), Brander & Goulder(2001)]
Rev(14–23)	Rev(14–23 BRU) • Rev and Tat are expressed early in the virus life cycle and thus may be important targets for CTL against HIV early in infection and for vaccines – therefore CTL responses against Tat and Rev were screened using overlapping peptides • 11/57 (19.3%) HIV-1+ individuals recognized at least 1 Tat peptide, and 21/57 (37%) responded to at least 1 Rev peptide • This epitope was also recognized by another individual in whom it was restricted by HLA*B5801, an allele closely related to HLA*B5701, suggesting cross-presentation by the two HLA alleles	KAVRIKLFLY	HIV-1 infection	human(B*5701, B*5801)	[Addo (2001)]
Rev(25–39)	Rev(25–39 HXB2) • Induces both Th and CTL activities, no HLA restriction analysis performed	SNPPPNPEGTRQARR	HIV-1 infection	human()	[Blazevic (1995)]
Rev(33–48)	Rev(33–48 HXB2) • Induces both Th and CTL activities, no HLA restriction analysis performed	GTRQARRNRRRRRWRE-R	HIV-1 infection	human()	[Blazevic (1995)]
Rev(41–56)	Rev(41–56 HXB2) • Induces both Th and CTL activities	RRRRWRERQRQIHSIS	HIV-1 infection	human()	[Blazevic (1995)]
Rev(55–63)	Rev(55–63 LAI) • Predicted to be an HLA-A1 epitope based on anchor residues 2S and 9Y • Both forms LSGWL(L or I)STY, with intact anchors, were found in an HLA-A1+ individual with Rev-responsive CTL • An HLA-A1 individual who did not make a Rev response had lost the C-term anchor, ISGWILS(T or N)S • 3/7 long-term non-progressors and 0/5 progressors were positive for HLA-B57 (associated with prolonged survival) • CTLp frequencies to Rev and Tat were inversely correlated with rapid progression to AIDS, but not Gag, RT or Nef	ISERILSTY	HIV-1 infection	human(A1)	[van Baalen (1997)]

Rev(55–63)	Rev(55–63)	ISERILSTY	HIV-1 exposed seronegative, HIV-1 infection	human(A1)	[Kaul (2001a)]
			<ul style="list-style-type: none"> • ELISPOT was used to study CTL responses to a panel of 54 predefined HIV-1 epitopes in 91 HIV-1-exposed, persistently seronegative (HEPS) and 87 HIV-1-infected female Nairobi sex workers 		
Rev(67–75)	()	SAEPVPLQL		(B14)	[Brander & Goulder(2001), van Baalen & Gruters(2000)]
Rev(67–75)	Rev()	SAEPVPLQL	HIV-1 infection	human(B14)	[Schutten (2001)]
			<ul style="list-style-type: none"> • Molecularly cloned primary NSI macrophage tropic strain 2.1 and SI non-macrophage tropic strain 1.2 were isolated from study participant ACH320 and used to infect irradiated XID mice that had been reconstituted with human PBMC from B14+ seronegative donors – results indicate CTL may favor selective outgrowth of macrophage tropic strains • The CTL clone TCC108 specific for SAEPVPLQL, previously described by van Baalen 1997, and van Baalen 1998, was stimulated <i>in vitro</i> and given to the mice to apply specific CTL pressure • The macrophage-tropic HIV-1 strain #2.1 escaped CTL pressure more efficiently (7/14 animals) than its non-macrophage-tropic counterpart #1.2 (SI) – the latter isolate was suppressed in 13/14 animals – macrophage may serve as a CTL sanctuary and reduced pressure on macrophage tropic HIV strains may allow additional replication to assist with acquisition of escape • HIV-1 variants selectively induced by TCC108 for SI strain 1.2: SEEPVPLQL, and for strain 2.1: SAEHVPLQL, SAESVPLQL, SVEPVPLQL, SLEPVPLQL, SAEPVPFQL, and SAEPVPFQL 		
Rev(67–75)	Rev(67–75 IIIB)	SAEPVPLQL	HIV-1 infection	human(B14, Cw8)	[van Baalen (1998)]
			<ul style="list-style-type: none"> • The Rev-specific CTL response studied here was from an individual infected with HIV-1 for more than 12 years without developing symptoms – Rev and Tat are expressed early and CTL activity against these proteins has been correlated with long-term survival • The CTL clone TCC108 specific for this epitope was studied <i>in vitro</i> • CTLs added immediately after infection suppressed viral production, indicative of CTL interference with viral production prior to lysis – CTL-mediated lysis occurred after the onset of progeny viral release, but prior to peak viral production • Rapid selection of a E69K mutation, which abolished CTL, recognition was observed • The epitope was originally listed as B14, but Cw8 and B14 are in linkage disequilibrium, and in this case were not distinguished (Pers. Comm., Christian Brander, 1999) 		
Rev(67–75)	()	SAEPVPLQL		(Cw5)	[Addo (2001), Brander & Goulder(2001)]
Rev(67–75)	Rev()	SAEPVPLQL	HIV-1 infection	human(Cw5)	[Goulder (2001b)]
			<ul style="list-style-type: none"> • Epitope name: SL9. Data from patient AC13 suggest a role for this epitope in initial control of viremia in acute infection, as it is one of several subdominant CTL epitopes recognized during the initial decline in viremia • A CTL response to SL9, SLYNTVATL, was not evident until 18 months post-presentation 		
Rev(67–75)	Rev(67–75 SF2)	SAEPVPLQL	HIV-1 infection	human(Cw5)	[Altfeld (2001c)]
			<ul style="list-style-type: none"> • Therapy provided during acute infection resulted in a narrower CTL response, stronger T help response, and a less diverse viral population than was seen in individuals treated during chronic infection 		

HIV CTL Epitopes

- The breadth and specificity of the response was determined using ELISPOT by studying 19 individuals with pre-seroconversion therapy (Group 1), 11 individuals with primary infection but post-seroconversion therapy (Group 2), and 10 individuals who responded to HAART given during chronic infection (Group 3), using 259 overlapping peptides spanning p17, p24, RT, gp41, gp120 and Nef
- Previously described and newly-defined optimal epitopes were tested for CTL response
- Number of HLA-Cw5+ individuals that had a CTL response to this epitope broken down by group: 2/6 group 1, 0/1 group 2, and 0/2 group 3

Rev(67–75)	Rev(69–77 BRU)	SAEPVPLQL	HIV-1 infection	human(Cw8)	[Addo (2001)]
<ul style="list-style-type: none"> • Epitope name: SL9. Rev and Tat are expressed early in the virus life cycle and thus may be important targets for CTL against HIV early in infection and for vaccines – therefore CTL responses against Tat and Rev were screened using overlapping peptides • 11/57 (19.3%) HIV-1+ individuals recognized at least 1 Tat peptide, and 21/57 (37%) responded to at least 1 Rev peptide • This epitope is the first defined HIV-specific CTL epitope restricted by HLA-Cw5 • This epitope was recognized by 2/5 individuals expressing HLA-Cw8 and by 5/11 individuals expressing Cw5 allele, which differs from Cw8 by 4 amino acids, suggesting promiscuous presentation of the epitope between those HLA molecules • Longitudinal data was available for 6 Rev-SL9 responders, who were treated during acute infection, and the response was stable 2 and 12 months after initiation of HAART, measurements by ELISPOT and flow-based intracellular cytokine staining (ICS) were concordant – in two subjects the response was heightened by transient reexposure to antigen with treatment interruption at 12 to 14 months 					
Rev()	Rev()		Vaccine	human()	[Calarota (1999)]
<p>Vaccine: Vector/type: DNA HIV component: Nef, Rev Tat</p> <ul style="list-style-type: none"> • 9/9 HIV-1+ subjects were given one of three DNA vaccinations for nef, rev or tat, and novel proliferative and CTL responses were generated • The nef DNA immunization induced the highest and most consistent CTLp activity, IFN-γ production, and IL-6 and IgG responses • Highly active antiretroviral treatment (HAART) did not induce new HIV-specific CTL responses but reduced viral load, while DNA vaccination induced new immune responses but did not reduce viral load – thus this is a potentially complementary and promising combination 					
Rev()	()			human()	[Novitsky (2001)]
<ul style="list-style-type: none"> • This study provides a survey of CTL responses and full length HIV-1 genome sequences from a C subtype infected Botswanan cohort • Anti-Rev CTL responses were distributed throughout the protein and 27/47 subjects (57%) demonstrated HIV-1C Rev-specific ELISPOT CTL responses of more than 100 SFC/106 PBMC 					
Rev()	Rev()		HIV-1 infection, Vaccine	human()	[Calarota & Wahren(2001)]
<p>Vaccine: Vector/type: DNA HIV component: Nef, Rev, Tat Stimulatory Agents: CpG motifs</p> <ul style="list-style-type: none"> • This review discusses the cellular immune response, and comments on the stimulatory role of CpG motifs and how HIV-1 DNA vaccines can boost the CTL and Th proliferative responses in asymptomatic HIV+ individuals 					

Rev()	Rev()	Vaccine	murine(H-2 ^d)	[Ishii (1997)]
Vaccine: <i>Vector/type:</i> DNA with CMV promotor <i>HIV component:</i> gp160, Rev <i>Stimulatory Agents:</i> cationic liposome <ul style="list-style-type: none"> • pCMV160/Rev is a DNA vaccine candidate carrying gp160 and Rev linked to a cytomegalovirus (CMV promotor) • pCMV160/Rev given in conjunction with a cationic liposome gave enhanced DTH, Ab and CTL responses 				
Rev()	Rev()	Vaccine	murine(H-2 ^d)	[Ihata (1999)]
Vaccine: <i>Vector/type:</i> DNA <i>HIV component:</i> rev <i>Stimulatory Agents:</i> CD40 <ul style="list-style-type: none"> • pcRev DNA i.m. vaccination in BALB/c mice induced Th1, Th2 and IgG responses, and enhanced the CTL response to Rev, but did not induce mucosal IgA 				
Rev()	Rev()	Vaccine	murine(H-2 ^d)	[Xin (2001)]
Vaccine: <i>Vector/type:</i> adeno-associated virus (AAV) <i>HIV component:</i> Env, Tat, Rev <i>Stimulatory Agents:</i> IL-2 <ul style="list-style-type: none"> • An AAV vector expressing HIV-1 env, tat, and rev genes (AAV-HIV vector) was used to vaccinate BALB/c mice • A single injection stimulated and long lasting serum IgG, fecal IgA, and HIV-specific CTL • Boosting enhanced the humoral response, and IL-2 enhanced T-cell immunity 				